PTO/SB/06 (08-03)
Approved for use through 7/31/2006. OMB 0651-0032
LLS. Patient and Trademic Office; U.S. DEPARTMENT OF COMMERCE
of the appropriate of information of the commence of the com

		ENT APPLIC	CATION	FEE DETE	RMINATIO			omeson due		1012	
CLAIMS AS FILED ~ PART I (Column 1) (Column 2) SMALL ENTITY							ÓR		R THAN ENTITY		
FOR		NUMB	NUMBER FILED		NUMBER EXTRA		RATE	FEE		RATE	FEE
BASIC FEE (37 CFR 1.16(a))								8	OR		•
TOTAL CLAIMS (37 CFR 1.16(c))			minus 20 = *			1	x \$ =		OR	x s =	
INDEPENDENT CLAIMS (37 CFR 1.18(b))		MS	minus 3 = *				X 5 =		OR	X 5 =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						1	+: =		OR	+1	
* If the difference in column 1 is less than zero, enter "O" in column 2.							TOTAL		OR	TOTAL	
	/ /c	LAIMS AS AM	ENDED	– PART II							
4	1,01,	10	,,		•				OR	OTHER	R THAN
	III	(Column 1)	·	(Column 2) HIGHEST	(Column 3)	•	SMALL	ENTITY	UK I		ENTITY
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	^	RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	33	Minus	<sup>-</sup> 33	• /		x s=		OR	xs =	
	Independent (37 CFR 1.18(b))	4	Minus	" <i>4</i>	*/	1	X \$ =		OR	x \$	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					1			OR.		
Cica					j	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
	140	P(Catumn 1)		(Column 2)	(Column 3)						
NT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
AMENDMENT	Total (37 CFR 1,18(c))	. 33	Minus	" <del>-</del>	-	1	X 5 =	FEE			FEE
	Independent (37 CFR 1.18(b))	· il	Minus		• /				OR	X \$=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))						X \$=		OR	X 8=	
	(a) and industry						TOTAL		OR	TOTAL	
							ADD'L FEE		OR	ADD'L FEE	
_		(Column 1)		(Column 2)	(Column 3)						
ENT C	<u></u>	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
M	Total (37 CFR 1,18(c))	•	Minus	-	3		x \$=		OR	x s=	
AMENDMENT	Independent (37 CFR 1.16(b))	- (	Minus	•••	=		X 8=		OR	x s=.	
Ą	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+3 =		OR	+ 3 =	
						• '	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
•	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										

This collection of information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEMD TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PATENT APPLICATE Effect	io	Application or Docket Number						
CLAIMS A	S FILED - PART (Column 1)	100	m2	SHALI	YIMG.	OR		THAN ENTITY
TOTAL CLAIMS	3°			RAT	FEE	7	RATE	FEE
FOR	MUNIDER FILED	MADA	EN EXTRA	2400	FEE 375.00	OR	BARRO FEE	750.00
TOTAL CHARGEABLE CLAIMS	32 minus 200	•	12.	<b>23.9</b>		OR	X\$18=	26
NOEPENDENT CLAMS	4 minus 3 ·	1		X42		•	-	94
MATPLE DEPENDENT CLAIM P	RESERT .			)		OR		-
* If the difference in column 1 is	less than zero, enter	The	oterno 2'	+140	_	los		
	MENDED - PAR			TOD		JOA		1050
[[[2]85 (Column 1)	(Colu	100	(Column 3)	SMA	LENTTY	OR	SHALL	
REMADIG AFTER AMBICHENT	PAID PAID	YELK	PRESENT	RATI	ADDI- TIONAL FEE		RATE	ADOI- TIONA FEE
AFTER ALEMENTATION OF THE ALEMENT OF	Mens - 3	2	- /	X\$ 9		OR	X\$18-	
Independent e 4	Minus' ess	4		X42-		OR.	X84=	1
FERST PRESENTATION OF M	ATPLE DEPENDENT	CAM		+140	1	1		/
1 1				101		OR	+250-	
11/18/05 (Column 1)	Coher	- 4	Makasa M	ADDIL P	EE	JOR	ADDIT FEE	-
CAMS.			(Column 3)	_	TADOL-	1		ADDI-
AFTER AMERICANIT.	PREVIO	WELY	PRESENT EXTRA	RATE			RATE	TIONA
AFTER ANDROMENT.  Total • 32  Independent • 9	Mira = 3	2	- /	X59		OR	X\$18-	./
Independent - 4	Minus on L	<i>{</i>	7	X42-		OR	X84.	<b>/</b> -
RRST PRESENTATION OF ME	LIPLE DEPENDENT	CLAM		-140	+		-	
000 1-5:08	50			100		OA	+250= 1014L	
ROL 1-5.01				ADDIL FI		OR	ACOIT, FEE	
COURT CONTRACTOR	(Column	-37	Column an	_	1 4004			
REMANDIG AFTER AMEDIMENT	PREVIO PAID	TELY	PRESERT	RATE			RATE	ADDI- TIONA
REMARKS AFTER AMERICANITY Total  Total	Minus es C		. 7	X3 9-	FEE	-	X\$18=	FEE
S Comments 10 Ct	Minus	Ŧ	•/		1	POR	XMa	
FIRST PRESENTATION OF ME	ILTIPLE DEPENDENT	CLAM		XIZ	1/	OR	AB40	
• If the crity is column 1 in less than th	e estre in column 2 — in-	+140-	A	OR.	+260-	an		
" If the Tighest Number Previously Fe mill the Tighest Number Previously Fe The Tighest Humber Previously Fel	id for in thes space a M for an thes space a	ines the	1 and 3.	ADDIT. FE			ADDIT. FEE	790
		4.5			~			